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MINTZ LEVIN COHN FERRIS GLOVSKY AND POPEO, P.C. One Financial Center Boston, Massachusetts 02111					Fee(s) Transmi papers. Each a have its own co I hereby certify States Postal S addressed to t	ittal. This certificate cannot be dditional paper, such as an as- ertificate of mailing or transmi Certificate of Mailing or y that this Fee(s) Transmittal i ervice with sufficient postage	Transmission s being deposited with the United for first class mail in an envelope ddress above, or being facsimile
APPLICATION NO.	FILING DATE	FILING DATE FIR			OR	ATTORNEY DOCKET NO). CONFIRMATION NO.
10/774,843	02/09/2004	02/09/2004 T		y Peled	24024-505 CONUS 9770		9770
TITLE OF INVENTION: Expansion Of Renewable Stem Cell Populations							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICA	TION FEE	TOTAL FEE(S) DUE	DATE DUE
Non-Provisional	yes	\$755.00		\$30	00.00	\$1,055.00	06/24/2011
EXAMINER		ART UNIT			UBCLASS		
M. G. Leavitt 1. Change of correspondence address or indication of "Fee			3		435-006 te patent front page, list Mintz Levin Cohn Ferris Glovsky		
Address" (37 CFR 1.363) Change of correct Correspondence A "Fee Address" ind form PTO/SB/47; Use of a Custome 3. ASSIGNEE NAME A PLEASE NOTE: Unless	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. NTED ON THE PATENT (print or type) ssignee data will appear on the patent. If an assignee is identified below, the document has been filed is form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Gamida Cell Ltd. Jerusalem, Israel							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government							
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X Issue Fee				A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted) X Payment by credit care					card. Form PT	O-2038 is attached.	
Advance Order -# of Copies The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0311							
5. Change in Entity Stat	tus (from status indicate	ed above)		_			
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature / Matthew Pavao /						Date	April 14, 2011
Typed or printed nam	Typed or printed name Matthew Pavao, J.D., Ph.D.					Registration No.	50,572